





For in Vitro Diagnostic Use

For Professional Use Only

Chlamydia trachomatis/ Neisseria/M.genitalium Real-TM Handbook

Multiplex Real Time PCR kit for qualitative detection of Chlamydia trachomatis, Neisseria gonorrhoeae and Mycoplasma genitalium

REF B67-100FRT



NAME

Chlamydia trachomatis/ Neisseria/M.genitalium Real-TM

INTRODUCTION

STDs (sexually transmitted diseases) refer to a variety of bacterial, viral and parasitic infections that are acquired through sexual activity. Some STDs, such as syphilis and gonorrhea, have been known for centuries — while others, such as HIV, have been identified only in the past few decades. STDs are caused by more than 25 infectious organisms. As more organisms are identified, the number of STDs continues to expand. Common STDs include: chlamydia, gonorrhea, herpes, HIV, HPV, syphilis, gardnerella and trichomoniasis. The Chlamydia trachomatis is nonmotile, gram-negative bacterial pathogen and is the most common sexually transmitted bacterial agent. The prevalence of C. trachomatis infection in sexually active adolescent women, the population considered most at risk, generally exceeds 10%, and in some adolescent and STD clinic populations of women, the prevalence can reach 40%. The prevalence of C. trachomatis infection ranges from 4 to 10% in asymptomatic men and from 15 to 20% in men attending STD clinics. Chlamydial infections in newborns occur as a result of perinatal exposure; approximately 65% of babies born from infected mothers become infected during vaginal delivery.

The development of tests based on nucleic acid amplification technology has been the most important advance in the field of STD diagnosis. Because nucleic acid amplification is exquisitely sensitive and highly specific, it offers the opportunity to use noninvasive sampling techniques to screen for infections in asymptomatic individuals who would not ordinarily seek clinical care.

INTENDED USE

Chlamydia trachomatis/Neisseria/M.genitalium Real-TM PCR kit is an *in vitro* nucleic acid amplification test for multiplex detection of *Chlamydia trachomatis*, *Neisseria gonorrhoeae* and *Mycoplasma genitalium* DNA in clinical materials (urogenital, rectal and pharyngeal swabs; conjunctival discharge; prostate gland secretion; and urine samples) by using real-time hybridization-fluorescence detection.



The results of PCR analysis are taken into account in complex diagnostics of disease.

PRINCIPLE OF PCR DETECTION

C.trachomatis / Neisseria / M.genitalium detection by the multiplex polymerase chain reaction (PCR) is based on the amplification of pathogen genome specific region using specific C.trachomatis / Neisseria / M.genitalium primers. In real-time PCR, the amplified product is detected using fluorescent dyes. These dyes are linked to oligonucleotide probes which bind specifically to the amplified product during thermocycling. The real-time monitoring of the fluorescence intensities during the real-time PCR allows the detection of accumulating product without re-opening the reaction tubes after the PCR run. Chlamydia trachomatis/Neisseria/M.genitalium Real-TM PCR kit is a qualitative test that contains the Internal Control (IC). It must be used in the extraction procedure in order to control the extraction process of each individual sample and to identify possible reaction inhibition. Chlamydia trachomatis/Neisseria/M.genitalium Real-TM PCR kit uses "hot-start", which greatly reduces frequency of nonspecifically primed reactions. "Hot-start" is guaranteed by chemically modified polymerase (TaqF), which is activated by heating at 95 °C for 15 min.

CONTENT

Reagent	Description	Volume, ml	Quantity
PCR-mix-1-FL C.trachomatis / Neisseria / M.genitalium	colorless clear liquid	1.2	1 tube
PCR-mix-2-FRT	colorless clear liquid	0.3	2 tubes
Polymerase (TaqF)	colorless clear liquid	0.03	2 tubes
Positive Control complex (C+)	colorless clear liquid	0.2	1 tube
DNA-buffer	colorless clear liquid	0.5	1 tube
Negative Control (C-)*	colorless clear liquid	1.2	1 tube
Internal Control-FL (IC)**	colorless clear liquid	1.0	1 tube

^{*}must be used in the extraction procedure as Negative Control of Extraction.

^{**} add 10 µl of Internal Control-FL during the DNA extraction procedure directly to the sample/lysis mixture (see DNA-sorb-A REF K-1-1/A protocol).

ADDITIONAL REQUIREMENTS

- DNA extraction kit.
- Transport medium.
- Disposable powder-free gloves.
- Pipettes (adjustable).
- Sterile pipette tips with aerosol barriers up to 200 μl.
- Tube racks.
- Vortex mixer.
- Desktop centrifuge with rotor for 2 ml reaction tubes.
- PCR box.
- Real Time PCR Instrument (for example, Rotor-Gene 6000/Q (Qiagen), iQ5 (BioRad), Mx3005P (Agilent))
- Disposable polypropylene microtubes for PCR PCR-plate
- Refrigerator for 2–8 ℃.
- Deep-freezer for $\leq -16 \,$ °C.
- Waste bin for used tips.

QUALITY CONTROL

In accordance with Sacace's ISO 13485-Certified Quality Management System, each lot is tested against predetermined specifications to ensure consistent product quality.

PRODUCT USE LIMITATIONS

All reagents may exclusively be used in in vitro diagnostics. Use of this product should be limited to personnel trained in the techniques of DNA amplification (EN375). Strict compliance with the user manual is required for optimal PCR results. Attention should be paid to expiration dates printed on the box and labels of all components. Do not use a kit after its expiration date.

WARNINGS AND PRECAUTIONS



In Vitro Diagnostic Medical Device

For In Vitro Diagnostic Use Only

- 1. Wear disposable gloves, laboratory coats and eye protection when handling specimens and reagents. Thoroughly wash hands afterward.
- 2. Do not pipette by mouth.
- 3. Do not eat, drink, smoke, apply cosmetics, or handle contact lenses in laboratory work areas.
- 4. Do not use a kit after its expiration date.
- 5. Dispose of all specimens and unused reagents in accordance with local regulations.
- 6. Biosafety Level 2 should be used for materials that contain or are suspected of containing infectious agents.
- 7. Clean and disinfect all spills of specimens or reagents using a disinfectant such as 0,5% sodium hypochlorite, or other suitable disinfectant.
- 8. Avoid contact of specimens and reagents with the skin, eyes and mucous membranes. If these solutions come into contact, rinse immediately with water and seek medical advice immediately.
- 9. Material Safety Data Sheets (MSDS) are available on request.
- 10. Use of this product should be limited to personnel trained in the techniques of DNA amplification.
- 11.PCR reactions are sensitive to contamination. Measures to reduce the risk of contamination in the laboratory include physically separating the activities involved in performing PCR in compliance with good laboratory practice.
- 12. Workflow in the laboratory must proceed in a uni-directional manner, beginning in the Extraction Area and moving to the PCR and Detection Area. Do not return samples, equipment and reagents in the area where you performed previous step.



Some components of this kit contain sodium azide as a preservative. Do not use metal tubing for reagent transfer.



Sampling of biological materials for PCR-analysis, transportation, and storage are described in details in the handbook of the manufacturer. It is recommended that this handbook is read before beginning of the work.

STORAGE INSTRUCTIONS

All components of the **Chlamydia trachomatis/Neisseria/M.genitalium Real-TM** PCR kit (except for polymerase (TaqF) and PCR-mix-2-FRT) are to be stored at the temperature 2–8 °C when not in use. All components of the

Chlamydia trachomatis/Neisseria/M.genitalium Real-TM PCR kit are stable until labeled expiration date. The shelf life of reagents before and after the first use is the same, unless otherwise stated.



PCR-mix-1-FL *N.gonorrhoeae/ C.trachomatis/ M.genitalium* is to be kept away from light.



Polymerase (TaqF) and PCR-mix-2-FRT are to be stored at ≤ -16 °C

STABILITY

Chlamydia trachomatis/Neisseria/M.genitalium Real-TM is stable up to the expiration date indicated on the kit label. The product will maintain performance through the control date printed on the label. The shelf life of reagents before and after the first use is the same, unless otherwise stated. Exposure to light, heat or humidity may affect the shelf life of some of the kit components and should be avoided. Repeated thawing and freezing of these reagents should be avoided, as this may reduce the sensitivity.

SAMPLE COLLECTION, STORAGE AND TRANSPORT

Chlamydia trachomatis/Neisseria/M.genitalium Real-TM can analyze DNA extracted from:

- cervical, urethral, conjunctival, pharyngeal swabs: insert the swab into the nuclease-free 1,5 ml tube and add 0,2 ml of Transport medium. Vigorously agitate swabs in medium for 15-20 sec.
- *urine sediment*: collect 10-20 ml of first-catch urine in a sterile container. Centrifuge for 30 min at 3000 x g, carefully discard the supernatant and leave about 200 µl of solution. Resuspend the sediment. Use the suspension for the DNA extraction.
- prostatic liquid stored in "Eppendorf" tube;
- seminal liquid: maintain semen for 40 min in darkness until liquefaction. Use 100 μl for the DNA extraction.

It is recommended to process samples immediately after collection. Store samples at 2–8 $^{\circ}$ C for no longer than 24 hours, or freeze at -20/80 $^{\circ}$ C. Transportation of clinical specimens must comply with country, federal, state and local regulations for the transport of etiologic agents.

DNA ISOLATION

The following isolation kit is recommended:

⇒ **DNA-Sorb-A** (Sacace, REF K-1-1/A).

Please carry out the DNA extraction according to the manufacturer's instructions. Add 10 µl of Internal Control during the DNA isolation procedure directly to the sample/lysis mixture.

(Note: the Sacace Internal Control is the same for all urogenital infectious kits)

PROTOCOL

The total reaction volume is 25 μ l, volume of DNA sample - 10 μ l.

- 1. Prepare required quantity of reaction tubes for samples (N) and controls (N+2).
- 2. Prepare in the new sterile tube 10*N μI of PCR-mix-1-FRT, 5*N μI of PCR-Buffer-FRT and 0,5*N μI of TaqF DNA Polymerase. Vortex and centrifuge briefly.
- 3. Add to each tube 15 µl of Reaction Mix and 10 µl of extracted DNA. Mix by pipetting.
- 4. Prepare for each panel 2 controls:
 - add 10 μl of DNA-buffer to the tube labeled NCA (Negative Control of Amplification);
 - add 10 µl of Positive Control C+ to the tube labeled C+ (PCR Positive Control);
- 5. Insert the tubes in the thermalcycler.

Amplification

1. Create a temperature profile on your instrument as follows:

Step	Rotor type instruments ¹		Plate or modular type instruments ²			
	Temperature, °C	Time	Cycles	Temperature, °C	Time	Cycles
Hold	95	15 min	1	95	15 min	1
Cycling	95	5 s	5	95	5 s	5
	60	20 s		60	20 s	
	72	15 s		72	15 s	
Cycling 2	95	5 s		95	5 s	
	60	20 s (fluore- scence detection)	40	60	30 s (fluore- scence detection)	40
	72	15 s		72	15 s	

¹ For example Rotor-Gene™ 6000/Q (Corbett Research, Qiagen)

The results are interpreted by the device software by the crossing (or not crossing) of the fluorescence curve with the threshold line.

Fluorescence is detected at the 2nd step of Cycling 2 stage (60 ℃) in FAM/Green, JOE/Yellow/HEX/Cy3, ROX/Orange/Texas Red, and Cy5/Red fluorescence channels.

² For example, iQ5™ (BioRad); Mx3005P™ (Agilent), ABI® 7500 Real Time PCR (Applied), SmartCycler® (Cepheid)

INSTRUMENT SETTINGS

Rotor-type instruments (RotorGene 6000/Q)

Channel	Threshold	More Settings/ Outlier Removal	Slope Correct
FAM/Green	0.1	0 %	Off
JOE/Yellow	0.1	5 %	Off
Rox/Orange	0.1	5 %	Off
Cy5/Red	0.1	5 %	On

Plate- or modular type instruments (iQ5, Mx300P, ABI 7500, SmartCycler)

For result analysis, set the threshold line at a level corresponding to 10–20% of the maximum fluorescence signal obtained for Pos C+ sample during the last amplification cycle.

DATA ANALYSIS

Chlamydia trachomatis DNA amplification product is detected in the JOE/Yellow/HEX fluorescence channel, Neisseria gonorrhoeae DNA is detected in the channel FAM/Green, Mycoplasma genitalium DNA is detected in the ROX/Orange channel, and the Internal Control is detected in the Cy5/Red channel.

The results of the analysis are considered reliable only if the results obtained for both Positive and Negative Controls are correct.

Table 2. Results for controls

Control	Stage for control	Ct channel FAM/Green, JOE/Yellow/HEX, ROX/Orange	FAM/Green, JOE/Yellow/HEX, Ct channel Cy5/Red	
C-	DNA extraction	Neg	Pos (< 33)	OK
NCA	Amplification	Neg	Neg	OK
C+	Amplification	Pos (< 33)	Pos (< 33)	OK

- 1. The sample is considered to be positive for *Chlamydia trachomatis* if its Ct value is defined in the results grid (the fluorescence curve crosses the threshold line) in the JOE/Yellow/HEX/Cy3.
- 2. The sample is considered to be positive for *Neisseria gonorrhoeae* if its Ct value is defined in the results grid (the fluorescence curve crosses the threshold line) in the FAM/Green channel.
- The sample is considered to be positive for Mycoplasma genitalium if its Ct value is defined in the results grid (the fluorescence curve crosses the threshold line) in the ROX/Orange channel.
- 4. The sample is considered to be negative for *Chlamydia trachomatis*, *Neisseria* spp. and *Mycoplasma genitalium* if its Ct value is not defined in the results grid (the fluorescence curve does not cross the threshold line) in FAM/Green, JOE/Yellow/HEX and ROX/Orange channels and in the results grid in the Cy5/Red channel the Ct value doesn't exceed boundary value (Ct < 33).

QUALITY CONTROL PROCEDURE

A defined quantity of Internal Control (IC) is introduced into each sample and control at the beginning of sample preparation procedure in order to control the extraction process of each individual sample and to identify possible reaction inhibition.

A negative control of extraction (NCE), negative amplification control (NCA), positive amplification control (C+) are required for every run to verify that the specimen preparation, the amplification and the detection steps are performed correctly.

If the controls are out of their expected range (see table Results for Controls), all of the specimens and controls from that run must be processed beginning from the sample preparation step.

SPECIFICATIONS

Sensitivity

Clinical material	Extraction kit	Microorganism	Sensitivity, copies/ml
Urogenital swabs	DNA-sorb-A	C. trachomatis	5x10 ²
		N. gonorrhoeae	5x10 ²
		M.genitalium	10 ³
Urine	DNA-sorb-A	C. trachomatis	10 ³
		N. gonorrhoeae	10 ³
		M.genitalium	2x10 ³



Analytical Sensitivity of each microorganism does not change even at high concentrations of two other microorganisms (to 10⁹ GE/ml).

Specificity

The analytical specificity of **Chlamydia trachomatis/Neisseria/M.genitalium Real-TM** PCR kit is ensured by selection of specific primers and probes as well as stringent reaction conditions. The primers and probes were checked for possible homologies to all sequences published in gene banks by sequence comparison analysis.

Nonspecific responses were absent in tests of human DNA samples and DNA of the following microorganisms: *Gardnerella vaginalis, Lactobacillus* spp., *Escherichia coli, Staphylococcus* spp., *Streptococcus* spp., *Candida albicans, Neisseria urealyticum, Neisseria parvum, Mycoplasma hominis, Chlamydia trachomatis, Mycoplasma genitalium, Neisseria* spp., *Ureaplasma urealyticum, Trichomonas vaginalis, Treponema pallidum, Toxoplasma gondii, HSV* types 1 and 2, *CMV*, and *HPV*.

TROUBLESHOOTING

- 1. Weak or no signal of the IC (Cy5 channel) for the Negative Control of extraction.
 - The PCR was inhibited.
 - ⇒ Make sure that you use a recommended DNA extraction method and follow to the manufacturer's instructions.
 - ⇒ Re-centrifuge all the tubes before pipetting of the extracted DNA for 2 min at maximum speed (12000-16000 g) and take carefully supernatant. Don't disturb the pellet, sorbent inhibit reaction.
 - The reagents storage conditions didn't comply with the instructions.
 - ⇒ Check the storage conditions
 - The PCR conditions didn't comply with the instructions.
 - ⇒ Check the PCR conditions and select for the IC detection the fluorescence channel reported in the protocol.
 - The IC was not added to the sample during the pipetting of reagents.
 - ⇒ Make attention during the DNA extraction procedure.
- 2. Weak or no signal of the Positive Control.
 - The PCR conditions didn't comply with the instructions.
 - ⇒ Check the amplification protocol and select the fluorescence channel reported in the manual.
- 3. Any signal on Fam(Green), Joe (Yellow)/Hex/Cy3, Rox (Orange)/TexasRed channels with Negative Control of extraction.
 - Contamination during DNA extraction procedure. All samples results are invalid.
 - ⇒ Decontaminate all surfaces and instruments with sodium hypochlorite and ethanol.
 - ⇒ Use only filter tips during the extraction procedure. Change tips between tubes.
 - ⇒ Repeat the DNA extraction with the new set of reagents.
- 4. Any signal with Negative Control of PCR (DNA-buffer).
 - Contamination during PCR preparation procedure. All samples results are invalid.
 - ⇒ Decontaminate all surfaces and instruments with sodium hypochlorite and ethanol or special DNA decontamination reagents.
 - ⇒ Pipette the Positive control at last.
 - ⇒ Repeat the PCR preparation with the new set of reagents.

KEY TO SYMBOLS USED

REF	List Number	Ţ	Caution!
LOT	Lot Number	\sum	Contains sufficient for <n> tests</n>
IVD	For <i>in Vitro</i> Diagnostic Use	VER	Version
	Store at	NCA	Negative Control of Amplification
	Manufacturer	C-	Negative control of Extraction
Ţ <u>i</u>	Consult instructions for use	C+	Positive Control of Amplification
\sum	Expiration Date	IC	Internal Control

REFERENCES

- Role of Chlamydia trachomatis in Miscarriage. Baud D, Goy G, Jaton K, Osterheld MC, Blumer S, Borel N, Vial Y, Hohlfeld P, Pospischil A, Greub G. Emerg Infect Dis. 2011 Sep;17(9):1630-5.
- Molecular Diagnosis of Genital Chlamydia trachomatis Infection by Polymerase Chain Reaction.
 Khan ER, Hossain MA, Paul SK, Mahmud MC, Rahman MM, Alam MA, Hasan MM, Mahmud NU, Nahar K. Mymensingh Med J. 2011 Jul;20(3):362-5.
- Chlamydia trachomatis prevalence in unselected infertile couples.Salmeri M, Santanocita A, Toscano MA, Morello A, Valenti D, La Vignera S, Bellanca S, Vicari E, Calogero AE. Syst Biol Reprod Med. 2010 Dec;56(6):450-6. Epub 2010 Sep 17.
- Urine-based testing for Chlamydia trachomatis among young adults in a population-based survey in Croatia: feasibility and prevalence. Božičević I, Grgić I, Židovec-Lepej S, Čakalo JI, Belak-Kovačević S, Štulhofer A, Begovac J. BMC Public Health. 2011 Apr 14;11:230.
- Frequency of Chlamydia trachomatis, Neisseria gonorrhoeae, Mycoplasma genitalium, Mycoplasma hominis and Ureaplasma species in cervical samples. Rodrigues MM, Fernandes PÁ, Haddad JP, Paiva MC, Souza Mdo C, Andrade TC, Fernandes AP. J Obstet Gynaecol. 2011;31(3):237-41.
- Prevalence of Chlamydia trachomatis: results from the first national population-based survey in France. Goulet V, de Barbeyrac B, Raherison S, Prudhomme M, Semaille C, Warszawski J; CSF group. Sex Transm Infect. 2010 Aug;86(4):263
- Evaluation of a new multiplex polymerase chain reaction assay STDFinder for the simultaneous detection of 7 sexually transmitted disease pathogens. Muvunyi CM, Dhont N, Verhelst R, Crucitti T, Reijans M, Mulders B, Simons G, Temmerman M, Claeys G, Padalko E. Diagn Microbiol Infect Dis. 2011 Sep;71(1):29-37. Epub 2011 Jul 27
- Urine-based testing for Chlamydia trachomatis among young adults in a population-based survey in Croatia: feasibility and prevalence. Božičević I, Grgić I, Židovec-Lepej S, Čakalo JI, Belak-Kovačević S, Štulhofer A, Begovac J. BMC Public Health. 2011 Apr 14;11:230.



Sacace Biotechnologies Srl via Scalabrini, 44 – 22100 – Como – Italy Tel +390314892927 Fax +390314892926

mail: <u>info@sacace.com</u> web: <u>www.sacace.com</u>

^{*}iQ5™ is a registered trademark of Bio-Rad Laboratories
* Rotor-Gene™ Technology is a registered trademark of Qiagen
* MX3005P® is a registered trademark of Agilent Technologies
*ABI® is a registered trademark of Applied Biosystems